

FILED

HARRISBURG, PA

1-00-10-1728

AUG 30 2002

WM. Branch CF375L
copy 98
Po Box 256
Waymart Pa 18472

aug. 27, 2002

MARY E. D'ANDREA, CLERK
Per Deputy Clerk

Certified mail No 7099-3400-009-5556

7099-3400-009-

3162-~~WB~~ WBAttn: D.O.C Po Box 598 Champ Hill Pa. 17101
1099-3400-009-3162- P.B.P.P. Po Box 1651 1101 S front ST Harrisburg Pa.
5600 5600 WB 17104-251

sir/madame I have three times in the
Past year Requested in Good Faith Discover
in the Form of Parole Statistic's, To this Date
you have not Provided me with the Requested
information Per Federal Rule of Civil Procedure
37(a)(2).

I again Request that you answer the Discover
question submitted herein and the previous
question submitted to you

- 1.) Can the D.O.C + the Parole Board deny Recommendation and Parole while a inmate is appealing his conviction because he will not admit he is guilty and take a sex offenders program which requires this admission
- 2.) How many Treated sex offender Re-offend same crime From 1995 To Date
- 3.) How many Untreated " " " " " "
- 4.) Sgt ~~meandrew~~ meandrew + C/Sherman at SCI Waymart How many Grievances do they have against them and what Disciplinary action if any has the D.O.C given them.
- 5.) have either one of these officer taken AA or NA because of a drinking Problem
- 6.) have they been charged with excess force or abuse against a Prisoner before. Respectfully

inclosed Please find Exhibits B-4 to B-7 showing
Tampering with my mail Rtu Sgt not stamping my cash slips
and putting it in the mail Box also letters not open with machine the
way the mail Room usually opens mail. Show someone else open my mail
Proof of Service

clearly mark legal mail This
is Done To Hinder my access
To COURT

DOC

P B P P

Po Box 598

1101 S Front St

Camp Hill

~~Harrisburg~~ Pa 17101-0598

Harrisburg Pa 17104-2519

Unsworn Declaration

I affirm that the above is True under
Penalty of the Law

Date 8-27-02

Respectfully
William Branch CF3950

Po Box 256

Waymart Pa. 18472

also Exhibit B-7

appeal of misconduct # ~~A2150~~ A275201

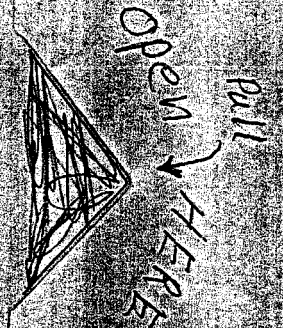
I mailed this out 7-26-02 I have not heard
anything B-6 is a letter to the Chief Counsel
asking about my appeal as he was to respond in 7 days
This is holding up my Exhaustion of Administrative Remedies



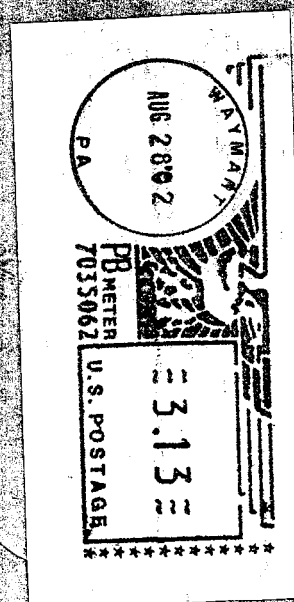
WM. Branch CF3756
Po Box 256
Waymont Pa 18472

Legal Mail

J. Connor
P.O. Box 983
Harrisburg Pa, 17108-0983



INMATE MAIL
PA. DEPT. OF CORRECTIONS



Name & No. Wm Brack CF8956
P.O. Box 256
Waymart, PA 18472-0256

INMATE MAIL
PA DEPARTMENT OF CORRECTIONS

Legal Mail

Certified mail
See Back

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A signature upon delivery
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail
- Certified Mail is *not* available for any class of international mail
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable post fee. Endorse mailpiece "Return Receipt Requested". To receive a duplicate return receipt, a USPS postmark on your Certified Mail is required.
- For an additional fee, delivery may be restricted to the addressee's authorized agent. Advise the clerk or mark the mail with endorsement "Restricted Delivery".
- If a postmark on the Certified Mail receipt is desired, please obtain one at the post office for postmarking. If a postmark on the receipt is not needed, detach and affix label with postage and meter.

IMPORTANT: Save this receipt and present it when making a claim.

PS Form 3800, July 1999 (Reverse)

D.O.C.
Po Box 598
Champhill Pa 17101-0598

PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS.
FOLD AT DOTTED LINE

CERTIFIED MAIL



7099 3400 0009 3162 1770
7099 3400 0009 3162 1770

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Article Sent To:
DOC PO Box 598 Champhill Pa 17601

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Name (Please Print Clearly) (to be completed by mailer)
Wm Branch CF3756

Street, Apt. No., or PO Box No.
PO Box 256

City, State, ZIP+4
Waymont Pa 18472

EX- B4
Name & No. CE3956 Mand
P.O. Box 256
Waymart, PA 18472-0256

INMATE MAIL
PA DEPARTMENT OF CORRECTIONS

Legal
Mail

Certified
Mail
See Back

P.B.P.P.

1101 S. Front St

Harrisburg Pa. 17104-2519

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A signature upon delivery
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail
- Certified Mail is *not* available for any class of international mail
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested with delivery. To obtain Return Receipt service, please complete a Return Receipt (PS Form 3811) to the article and add applicable postage fee. Endorse mailpiece "Return Receipt Requested". To receive a duplicate return receipt, a USPS postmark on your Certified Mail is required.
- For an additional fee, delivery may be restricted to the addressee's authorized agent. Advise the clerk or mark the endorsement "Restricted Delivery".
- If a postmark on the Certified Mail receipt is desired, please affix it at the post office for postmarking. If a postmark on the receipt is not needed, detach and affix label with postage paid.

IMPORTANT: Save this receipt and present it when making a claim.

PS Form 3800, July 1999 (Reverse)

PLACE STICKER AT TOP OF ENVELOPE
TO THE RIGHT OF RETURN ADDRESS
FOLD AT DOTTED LINE

CERTIFIED MAIL



7099 3400 0009 3162 1763
7099 3400 0009 3162 1763

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Article Sent To:

PO BOX 1101 S. Front St Harrisburg Pa 17106

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Name (Please Print Clearly) (to be completed by mailer)

Wm Branch CF3756

Street, Apt. No., or PO Box No.

PO Box 256

City, State, ZIP+4

Harrisburg Pa 17106

PS Form 3800, July 1999

See Reverse for Instructions